

Natural Resources Conservation Service – Kansas
Supplemental Instructions for Construction

Please contact Erin M. Riffey, 785-823-4505 or erin.riffey@ks.usda.gov, if you have additional questions in filling out this form.

Standard Form (SF) 424 – Application for Federal Assistance

1. Application
2. New
3. Leave Blank
4. Leave Blank
5. Leave Blank
6. Leave Blank
7. Leave Blank
8. Please put your information. Sections a, b, c, and d must be filled out. Section e is optional. Section f should be the contact information of the administrative contact of the agreement.
9. Please decide which of the below most accurately describes you:
 - a. State Government
 - b. County Government
 - c. City or Township Government
 - d. Special District Government (i.e. Watersheds)
 - e. Regional Organization
 - f. U.S. Territory or Possession
 - g. Independent School District
 - h. Public/State Controlled Institution of Higher Education
 - i. Indian/Native American Tribal Government (Federally Recognized)
 - j. Indian/Native American Tribal Government (other than Federally Recognized)
 - k. Indian/Native American Tribally Designated Organization
 - l. Public/Indian Housing Authority
 - m. Nonprofit
 - n. Private Institution of Higher Education
 - o. Individual
 - p. For-Profit Organization (Other than Small Business)
 - q. Small Business
 - r. Hispanic-Serving Institution
 - s. Historically Black Colleges and Universities (HBCUs)
 - t. Tribally Controlled Colleges and Universities (TCCUs)
 - u. Alaska Native and Native Hawaiian Serving Institutions
 - v. Non-US Entity
 - w. Other (specify)
10. Natural Resources Conservation Service (Kansas)

11. 10.904, Watershed Protection and Flood Prevention; 10.916, Watershed Rehabilitation; 10.923, Emergency Watershed Protection Program
 12. Leave Blank
 13. Leave Blank
 14. Kansas (unless your proposal covers only specific counties, then please specify which counties)
 15. Please include a descriptive title
 16. Please list the Congressional Districts
 17. Please include an estimated start and end date
 18. Please include the estimated funding from all sources on this project
 - a. Federal includes NRCS and any other federal agency (NRCS supplement will specify the amount of NRCS funding requested)
 - b. Please include the funding you are providing here and only in this field, even if you are also a Federal, State or Local agency.
 - c. Any state agency contribution
 - d. Any local agency contribution
 - e. Any other sources contribution
 - f. This field only applies if the agreement project is generating income
 - g. Total
- These fields will tell us what type of agreement instrument will be drafted.
100% Federal funds – Cooperative Agreement
25% or more NonFederal funds – Contribution Agreement (if the Sponsor is providing less than 50% of the funds then they must include a waiver showing need for and justifying Federal funds for more than 50% of the project)
19. Please check box c.
 20. Please check the applicable box
 21. Please complete this section.

SF 424C, Budget Information –Construction Programs
Please complete. Contact Roger Masenthin, 785-823-4537, or
roger.masenthin@ks.usda.gov for assistance.

SF 424D, Assurances –Construction Programs
Review and sign page 2.

Kansas NRCS Supplemental Form
Please fill out the next page and attach to the SF 424.

Kansas NRCS SF 424 Supplement

Descriptive Title of Applicant's Project (Please use same title as on the SF 424):

Purpose to be achieved:

Type of Award Instrument:

___ Force Account (Sponsor performs all the work using its own equipment and personnel, supplementing with only minor amounts of rented equipment.)

___ Performance of Work (Most of work performed under a competitively awarded local contract with the Sponsor able to perform up to its contribution of the agreement. Items and value of the work performed by the sponsor are negotiated prior to the agreement).

___ Contracting Local Organization (Work is completed under a locally awarded contract which is competitively bid. Sponsor provides Contracting Officer and alternate.)

	Contracting Officer	Alternate Contracting Officer
Name:		
Address:		
Phone:		
Fax:		
Email:		

___ Federal Contract (NRCS completes a competitive contract action under the Federal Acquisition Regulations. Partner must create and maintain an interest bearing bank account with their funds for the project.)

___ Division of Work (PL 566 only) (Sponsor may complete its share for the work by force account, contributed labor and equipment, or any other means consistent with drawings and specifications, as agreed upon prior to the execution of the agreement.)

Contacts: (If different than on SF 424)

	Administrative	Technical
Name:		
Title:		
Phone:		
Fax:		
Email:		

Specific Objective Narrative. Please provide 2-4 sentences briefly describing the specific objective:

Expected accomplishments and deliverables. Please provide a title and 2-4 sentences for each project component or end product. Include the estimated amount of funds used for each:

Resources Required. Please list any resources you will provide or will need NRCS to provide:

Milestones. Every project should list at least two milestones and a projected date that the milestone(s) is reached. Complex projects should include milestones for each phase:

Day One	Execution
Week Two	Issue Notice to Prospective Bidders
Week Five	Issue bid packets
Week Seven	Conduct site showing
Week Nine	Conduct bid opening
Week Ten	Issue Apparent Low Letter
Week Thirteen	Review Contractor submittals
Week Fifteen	Award Contract
Week Sixteen	Issue Notice to Proceed
Week Eighteen	Performance Time Begins
Week _____	25% Completion of Project
Week _____	50% Completion of Project
Week _____	75% Completion of Project

Week _____

Project Completed

Week _____

Final Inspection (Use same week as above)

Week _____

Close out of agreement (4 weeks after above week)